



**Town of Acton**  
**Department of Public Health**  
472 Main Street, Acton, MA 01720  
Phone: (978) 929-6632 Fax: (978) 929-6340  
www.acton-ma.gov

**ANNUAL INSPECTION HAZARDOUS MATERIALS PERMIT HOLDER**

Facility Name: Windriver environmental Date 8/3/2015  
Address: 54 Knox Trail, building 5  
Type of Business: Truck garage  
Telephone: 508-962-7142 Email: Mdutra@wrenvironmental.com  
Contact Person: Matt Dutra Initial Inspection ☒ Re-Inspection ☐

Housekeeping:	Y	N	Comments
Area clean	<input checked="" type="checkbox"/>		
Spills present	<input checked="" type="checkbox"/>		Spills but cleaned up
Appropriate material storage	<input checked="" type="checkbox"/>		
Materials and wastes separate	<input checked="" type="checkbox"/>		
Cleanup materials available	<input checked="" type="checkbox"/>		Spill kit and speedy dry
Materials have secondary containment		<input checked="" type="checkbox"/>	Please provide secondary containment for hazmat
Materials and wastes are labeled		<input checked="" type="checkbox"/>	Please label waste and new product
Safety:			
Are MSDS sheets available on site	<input checked="" type="checkbox"/>		
Employee personal protective equipment on site	<input checked="" type="checkbox"/>		
Employees trained in Haz Mat handling	<input checked="" type="checkbox"/>		
Emergency procedures posted		<input checked="" type="checkbox"/>	Please provide emergency procedure
Site Management:			
Waste removed by licensed hauler	<input checked="" type="checkbox"/>		Clean harbors, please provide manifest records
Floor drains present in area of Haz Mat or waste		<input checked="" type="checkbox"/>	
Sinks present in area of Haz Mat or waste		<input checked="" type="checkbox"/>	
Testing of septic system necessary		<input checked="" type="checkbox"/>	
Does site plan on file reflect current arrangement	<input checked="" type="checkbox"/>		
Any UST (underground storage tank) present		<input checked="" type="checkbox"/>	
If UST present, is it alarmed		<input checked="" type="checkbox"/>	

**Action Items:**

1. Secondary containment for all hazardous materials and waste  
Label new and waste materials
2. Provide manifest records
3. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

Re-inspection required? Yes ☒ No ☐

*Matt Dutra*  
Inspector Signature

\_\_\_\_\_  
Date

Re-inspection Date: Via email within 2 weeks

*Matt Dutra*  
Facility Representative Signature

\_\_\_\_\_  
Date